REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 2 Serial/Patent #08/58/,743						
3 Please refund the following fee(s):		e(s):	4 PAI NUM	PER IBER	5 DATE FILED	6 AMOUNT
	Filing					\$
	Amendment					\$
	Extension of Time					\$
	Notice of Appeal/Appeal					\$
	Petition					\$
	Issue					\$
	Cert of Correction/Terminal	l Disc.				\$
	Maintenance					\$
·	Assignment					\$
X	Other				1-2496	\$ 250.00
			7 TOTAL AMOUNT OF REFUND			\$ 250.00
			8 TO BE REFUNDED BY:			
10 REASON:			X	Treasury Check		
X	Overpayment			С	redit Dep	osit A/C #:
	Duplicate Payment		9			
	No Fee Due (Explanation):					
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: E. M. IVey TITLE: J. G.Am.						
SIGNATURE: O.M. Lee PHONE: 308-1202						
office: <u>AIF</u>						
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: 1010 June 10 June						
APPROVED: Ilda Connello DATE: 3/1/96						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B